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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

A	For the	e 2009 calendar year, or tax year beginning MAY 26, 2009 and ending	DEC 31, 2009	
	Check If	C Name of organization	D Employer identific	ation number
	applicabl		' '	
	Addre	ss label or T no		
F	Name	NOE Date Business As	80-04	144461
5	lchang	See Number and start (av D.O. have freely a not delivered to street address). Beam(out	e E Telephone number	
F	retum Termir	- Specific N.S. Wort 36th Street 6th Floor		378-2800
	ated Amen	ded tions City or town state or sounting and ZID 4.4	G Gross receipts \$	1,182,342.
F	Iretum Applio		H(a) Is this a group re	
	tion لــــ pendii		for affiliates?	Yes X No
		same as C above	H(b) Are all affiliates incl	uded? Yes No
_	Tax-ex	empt status: X 501(c) (4		list (see instructions)
_		te: ► n/a	H(c) Group exemption	
				State of legal domicile NY
	art I	Summary		
سننا	1	Briefly describe the organization's mission or most significant activities: Promoting	social welfa	are and the
ဦ	'	common good, advancing social justice, and ad	vocating pol	icy reform
'n	2	Check this box if the organization discontinued its operations or disposed of mo		
.ଧୀଧ Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	3
ဇိ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	3
ب مخ	5	Total number of employees (Part V, line 2a)	5	3 3 0
itie	6	Total number of volunteers (estimate if necessary)	6	3
SUIU Activ	72	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.
₹	′°	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
a		Net unrelated business taxable mosmo from some 17 miles of	Prior Year	Current Year
≠ _	8	Contributions and grants (Part VIII, line 1h)		1,181,000.
) <u>a</u>	9	Program service revenue (Part VIII, line 2g)		
/ DE⊗ Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,342.
ے ہے	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
Ŭ	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,182,342.
SUPUNISE DE E	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		186,600.
2	14	Benefits paid to or for members (Part IX, column (A), line 4)		
) 	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Se Po	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
per		Total fundraising expenses (Part IX, column (D), line 25)		
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		112,802.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		299,402.
		Revenue less expenses. Subtract line 18 from line 12		882,940.
20			Beginning of Current Year	End of Year
Net Assets or	20	Total assets (Part V. line 16)		955,431.
Ass	21	Total liabilities (Part X, line 26)	Ó	72,491.
ž,	22		œ	882,940.
	art II	The description of the second		
ســـــ		Under penalties of pergury I declare that I have examined this return, including accompanying stiffcules and distriction	s, and to the best of my knowled	ge and belief, it is true, correct,
		and complete Declaration of preparer (other than)officer) is based on all information of which preparer has any knowled		
Sig	ne	Lysan Stanuels		110
He	_	Signature of officer	Date /	
•••		Susan Stamler, Secretary		
		Type or print name and title		
_		Preparer's N 1/ (00 N 199 1 9 9	Check If Prepare	er's identifying number structions)
Pa		signature V 12 4	(see ins	
	eparer's	Firm's name (or Owen J Flanagan & CO	EIN ▶	\sim \sim
Us	e Only	self-employed), 60 East 42nd Street	· · · · · · · · · · · · · · · · · · ·	(5)
		address, and ZIP+4 New York, NY 10165	Phone no ► 2	12-682-2783
Ma	av the I	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

Page 3

Pal	T IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	_1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3	ł	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6]	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		·- <u>-</u>	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	Ť		
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?	<u> </u>		<u> </u>
	If "Yes," complete Schedule D, Part V	10		x
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
••	as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		 	1
	Part VI.			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	ļ		
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	ļ	Į.	1
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12				
	Schedule D, Parts XI, XII, and XIII.	12	X	1
124	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			\vdash
_	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	1.15		1
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		1	
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			T-
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		 	†
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	<u> </u>	 	
. 5	complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes " complete Schedule H	20		X

Form **990** (2009)

C-1		<u> </u>	P	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part II	x ,		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		1	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	ie		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a	ļ	Х
b		24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ĺ	X
ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		1	
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disque	alified		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	ļ		
а	A CONTRACT OF THE CONTRACT OF	28a		X
b		28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member)			
_	an officer, director, trustee, or direct or indirect owner? If "Yos," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	1	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		1	
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?		1	
	If "Yes." complete Schedule N. Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	-	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			<u> </u>
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization		-	
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	1	X

Form **990** (2009)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Note. All Form 990 filers are required to complete Schedule O.

80-0444461

Form 990 (2009)

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 4 U.S. Information Returns. Enter -0- if not applicable 0 1b b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 0 filed for the calendar year ending with or within the year covered by this return 2b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) Х За 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a **b** If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5b b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited 5с Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х 6a any contributions that were not tax deductible? **b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services X 7a provided to the payor? 7b b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X 7c to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? **7f** f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings 8 at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Form 990 (2009)

Form 990 (2009)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Sec	tion A. Governing Body and Management			
		,	Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent	<u> </u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other		- 1	••
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			l
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			ĺ
	by the following:	1 1		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b_	_X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	~,		
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filling the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	L
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Х	<u> </u>
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	ļ
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►NY			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ncial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation: 🕨	_	
	The Organization - 212-378-2800			
	45 West 36th Street, 6th Floor, New York, NY 10018			
		Form	990	(2009)

80-0444461

Page 7

Form 990 (2009) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Employees, and Independent Contractors

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

(A) Name and Title	(B) Average hours	(c		Pos all 1	ition	арр	ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Кеу епріоуес	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
John Gilroy, Esq	1.00								0	
President	1.00	X	<u> </u>	Х	<u> </u>	<u> </u>		0.	0.	0.
Susan Stamler	1 00			٠,,					_	
Secretary	1.00	X		Х	 			0.	0.	0.
Gina Kim Director	1.00	x						0.	0.	0.
				:						
		\vdash			-					
		\vdash				\vdash				
			\vdash		 					

Form **990** (2009)

Pai	T VII Section A. Officers, Directors, Tru (A)	ıstees, Key Er (B)	nplo	yee	s, aı (C		ligh	est	Compensated Employ (D)	ees (continued) (E)			(F)	
	Name and title	Average	<u>ا</u> , ,		Posi	ition			Reportable	Reportable		Est	mate	
		hours per week	Individual mustre or director	Institutional trustee	Officer		Highest compensated demployee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC	(2)	omp fro orga and	ount of other oensal om the nization relation	tion e on ed
							-							
			_									-		
							<u> </u>	_						
			_				-	_						
	Total		<u>. </u>						0.		0.			0.
2	Total number of individuals (including but r compensation from the organization	not limited to th	nose	liste	ed al	bov	e) w	ho r	eceived more than \$100	0,000 in reportable				0
3	Did the organization list any former officer			e, ke	y em	nplo	yee,	or h	highest compensated ei	mployee on		3	Yes	No X
4	line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si and related organizations greater than \$15	um of reportab	le c	-						the organization		4	•	х
5	Did any person listed on line 1a receive or the organization? If "Yes," complete Sched	accrue compe	nsat	ion f						ices rendered to		5		х
	ction B. Independent Contractors													
1	Complete this table for your five highest continuous the organization NONE	ompensated in	dep	ende	ent c	ont	racto	ors t		\$100,000 of comp	oensati			
	(A) Name and business	address							(B) Description of s	services	Cor	nper) Isatio	n
		_		_				_						
														
	Total number of independent contractors (includes but	not l	mito	d to	the		etca	d above) who received a	nore than	***************************************			·····
2 	\$100,000 in compensation from the organi	_	,Ot 11		J 10		0		above, who received h	To trian			200	2000
											F	orm s	JYU (2009)

Public Interest Projects Action Fund, 80-0444461 Page 9 Form 990 (2009) Part VIII Statement of Revenue (D) Revenue (B) (C) (A) Unrelated Related or Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, gifts, grants and other similar amounts 1 a Federated campaigns 1a Membership dues 1b c Fundraising events 1c d Related organizations e Government grants (contributions) 1e All other contributions, gifts, grants, and 1f 1,181,000. similar amounts not included above 9 Noncash contributions included in lines 1a-1f \$ $\overline{\triangleright}$ 1,181,000. Total. Add lines 1a-1f **Business Code** Program Service Revenue f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,342. 1,342. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (II) Personal (i) Real 6 a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) ▶ d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses ▶ c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming act 10 a Gross sales of inventory, less returns and allowances

	· · · · · · · · · · · · · · · · · ·						1	1		
b	Less: direct expenses	b								
C	Net income or (loss) from gaming activities		•	······································						
а	Gross sales of inventory, less returns									
	and allowances	а								
b	Less: cost of goods sold	b						- 1		
С	Net income or (loss) from sales of inventory		•							
	Miscellaneous Revenue		Business Code							
а		_								
b		_								
С		_								
d	All other revenue									
е	Total. Add lines 11a-11d		▶ _							
	Total revenue See instructions		1	,182,34	2	0.	_	0.	1,342	<u>2 .</u>
									Form 990 (206	09)
				9						
2	788682 1255A	20	009.04000	Public	Interest	: Pro	ojects	Ac	1255A	_1
							_			

11 a

Inc.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comple				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	186,600.	186,600.		······
2	Grants and other assistance to individuals in			į	
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,			ĺ	
	organizations, and individuals outside the US	1			
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	-			·····
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	·			
7 9	Other salaries and wages Pension plan contributions (include section 401(k)				
8	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				
b	Legal				
c	Accounting	-			
d					
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	98,107.	81,723.	16,384.	
12	Advertising and promotion				
13	Office expenses	177.		177.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		 		
20	Interest	- ·- ·- ·- ·-			
21	Payments to affiliates	-			
22	Depreciation, depletion, and amortization				
23	Insurance				- WHO W
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Administrative fees	13,208.		13,208.	
b	License and permits	1,260.		1,260.	<u> </u>
С	MIscellaneous	50.	45.	5.	
d					
е					
f	All other expenses	000 400	0.60-0.60	21 024	
25	Total functional expenses. Add lines 1 through 24f	299,402.	268,368.	31,034.	0.
26	Joint costs. Check here If following				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined			ļ	
	educational campaign and fundraising solicitation				Form 990 (2009)

Form 990 (2009)

Part X **Balance Sheet** (A) End of year Beginning of year 699,344. 1 Cash · non-interest-bearing 1 256,087. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a basis. Complete Part VI of Schedule D **b** Less: accumulated depreciation 10b 10c 11 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 955,431. 72,491. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities. Complete Part X of Schedule D 72,491. 0. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 87,284. 795,656. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 882,940. 0 33 33 Total net assets or fund balances 955,431. 34 Total liabilities and net assets/fund balances

Form **990** (2009)

1 0111	1990 (2009)			90
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	x	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both. X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	3a	ļ	X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	1	1	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	<u> </u>	<u> L</u>

Form **990** (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations. Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

Name of org	anization Public	Interest Project	s Action Fu	ind, Em	ployer identification number
_	Inc.			,	80-0444461
Part I-A		ganization is exempt und	er section 501(c	or is a section 527	
1 Provide		zation's direct and indirect politic			
	l expenditures	·		>	\$ 0.
3 Volunte	er hours				0.
Part I-B	Complete if the or	ganization is exempt und	er section 501(c)(3).	·
1 Enter th	ne amount of any excise tax	incurred by the organization und	der section 4955	•	\$
2 Enter th	ne amount of any excise tax	incurred by organization manag	ers under section 495	5	\$
3 If the or	rganization incurred a section	on 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a	correction made?				└─ Yes └─ No
	describe in Part IV.				
Part I-C		ganization is exempt und			
1 Enter th	ne amount directly expende	d by the filing organization for se	ction 527 exempt fund	ction activities	\$0.
2 Enter th	ne amount of the filing organ	nization's funds contributed to ot	her organizations for s		•
exempt	function activities			>	\$0.
 Total ex 	cempt function expenditure	s. Add lines 1 and 2. Enter here a	and on Form 1120-PO	L,	
line 17b)			•	\$
4 Did the	filing organization file Form	1120-POL for this year?			Yes No
5 Enter th	ne names, addresses and e	mployer identification number (El	N) of all section 527 p	political organizations to wh	nich payments were made.
		the amount paid from the filing o			
that we	re promptly and directly de	livered to a separate political org	anization, such as a s	eparate segregated fund o	r a political action committee
(PAC).	f additional space is neede	d, provide information in Part IV.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
		,		funds. If none, enter -0	promptly and directly delivered to a separate
		1			political organization.
		1			If none, enter -0-
				· · · · · · · · · · · · · · · · · · ·	
		1	1	1	

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Schedule C (Form 990 or 990-EZ) 2009

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

4	Public	Inte	erest Projec	cts Action H	rund,	€ 13	•
Schedule C (Form 990 or 990-EZ) 2009	Inc.					0444461	Page 2
Part II-A Complete if the org		s exem	pt under section	501(c)(3) and file			1 age E
(election under sec	•		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
A Check ▶ ☐ if the filing organiza			ated group				•
	_		d "limited control" pro	visions anniv			
Limi	ts on Lobbyin	g Expen			(a) Filing organization's totals	(b) Affiliated total	
1a Total lobbying expenditures to infli	uence public o	pinion (a	rass roots lobbying)				
b Total lobbying expenditures to infl	•			Ī			
c Total lobbying expenditures (add i	•	•	, (,,				
d Other exempt purpose expenditur		-,					
e Total exempt purpose expenditure		and 1d)					
f Lobbying nontaxable amount Ent	-			n columns.			
If the amount on line 1e, column (a) of			ying nontaxable amo				
Not over \$500,000	` , i		he amount on line 1e.	11			
Over \$500,000 but not over \$1,00			plus 15% of the exc				
Over \$1,000,000 but not over \$1,5		•	plus 10% of the exc				
Over \$1,500,000 but not over \$17	1		plus 5% of the exce				
Over \$17,000,000		\$1,000,0					
g Grassroots nontaxable amount (er	nter 25% of lin	e 1f)					
h Subtract line 1g from line 1a If zei	ro or less, ente	er -0-					
i Subtract line 1f from line 1c If zero	o or less, ente	r -0-		į		<u></u>	
j If there is an amount other than ze	ero on either lir	ne 1h or li	ine 1i, did the organiza	ation file Form 4720			
reporting section 4911 tax for this	_		·			Yes	No.
	zations that n	nade a se		Section 501(h) n do not have to comp es 2a through 2f on pa			
	Lobbyin	g Expen	ditures During 4-Yea	ar Averaging Period			
Calendar year (or fiscal year beginning in)	(a) 200	6	(b) 2007	(c) 2008	(d) 2009	(e) To	otal
2a Lobbying nontaxable amount	<u></u>						
 b Lobbying ceiling amount (150% of line 2a, column(e)) 							
c Total lobbying expenditures							

Schedule C (Form 990 or 990-EZ) 2009

d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

80-0444461 Page 3

Schedule C (Form 990 or 990-EZ) 2009 Inc. 80-044446

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)	
	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			<u></u>	
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If "Yes," describe in Part IV				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ	<u> </u>	
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		<u> </u>	<u> </u>	
art III-A Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6).	tion 501(c)	(5), or se	ection	
CONTRACT.			Yes	
Were substantially all (90% or more) dues received nondeductible by members?		1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_ 2		
B Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P		3)(5), or se		
Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P "Yes."		3)(5), or se		
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Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; any additional information.	excess d political and Part II-B	3)(5), or se ne 3 is a 1 2a 2b 2c 3	o, complete	
Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues lf notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5;	excess d political and Part II-B	3)(5), or se ne 3 is a 1 2a 2b 2c 3	o, complete	
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Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; any additional information.	excess d political and Part II-B	3)(5), or se ne 3 is a 1 2a 2b 2c 3	o, complete	
art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the edoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; any additional information. art 1 - A, Line 1. The Organization did not engage indirect political campaign activities.	excess d political and Part II-B	3)(5), or se ne 3 is a 1 2a 2b 2c 3 4 5	o, complete	e this
art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P"Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the edoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; any additional information. art 1-A, Line 1. The Organization did not engage indirect political campaign activities.	excess d political and Part II-B	3)(5), or se ne 3 is a 1 2a 2b 2c 3 4 5	o, complete	e this
Did the organization agree to carryover lobbying and political expenditures from the prior year? art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if P "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the edoes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) art IV Supplemental Information Implete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; any additional information. art 1-A, Line 1. The Organization did not engage in the prior year?	excess d political and Part II-B	3)(5), or se ne 3 is a 1 2a 2b 2c 3 4 5	o, complete	e this

932043 02-04-10

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2009
Open to Public Inspection

Name of the organization

Public Interest Projects Action Fund,

Employer identification number 80-0444461

Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	sed funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
	for charitable purposes and not for the benefit of the donor		
	impermissible private benefit?		Yes No
Pa		ganization answered "Yes" to Form 990,	
1	Purpose(s) of conservation easements held by the organizat		
•	Preservation of land for public use (e.g., recreation or		istorically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form	n of a conservation easement on the last
-	day of the tax year	med donder valion donated in the form	Tota conso, valien casement on the last
	day of the tax year		Held at the End of the Tax Year
2	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
•	Number of conservation easements on a certified historic st	ructure included in (a)	2c
۰	Number of conservation easements included in (c) acquired	• •	2d
д 3	Number of conservation easements modified, transferred, re		
3	year	sieased, extiliguished, of terminated by th	to organization during the tax
4	Number of states where property subject to conservation ea	seement is located	
5	Does the organization have a written policy regarding the pe		f
•	violations, and enforcement of the conservation easements	- · · · · · · · · · · · · · · · · · · ·	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
•	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 1.	Yes No
9	In Part XIV, describe how the organization reports conservat	tion easements in its revenue and expens	
•	include, if applicable, the text of the footnote to the organization		
	conservation easements.	Mon 3 Milanolai Statements that dosense	o the organization o accounting to
Pa	rt III Organizations Maintaining Collections of	of Art. Historical Treasures. or	Other Similar Assets.
	Complete if the organization answered "Yes" to Form		
12	If the organization elected, as permitted under SFAS 116, no	of to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	the footnote to its financial statements that describes these		obilo del vido, provido, invalidad, and texto
			ince sheet works of art, historical treasures.
þ	or other similar assets held for public exhibition, education,		
		or research in furtherance of public service	ce, provide the following amounts relating to
	these items:		> \$
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
_	(ii) Assets included in Form 990, Part X	and the second section for finance	
2	If the organization received or held works of art, historical tre		iai yain, provide
	the following amounts required to be reported under SFAS	i to relating to these items:	> ¢
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
Ь	Assets included in Form 990, Part X		Ψ

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

•	" • Public I	ntarest	Proje	7+8 Ac	tion F	und.		(, ,	
Sahar	dule D (Form 990) 2009 InC.	nceresc		JUB AC	CION 1	41147	80-0	444461	
·	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items								
3	(check all that apply)	, and other roc	, O, OO, O, ICC,	ally Of the	i lonowing the	it are a orgin			itoms
а	Public exhibition		d 🗀 i	oan or exc	change progra	ams			
b	Scholarly research			Other	mange progre				
c	Preservation for future generations		•	Julie1					
4	Provide a description of the organization's colle	actions and ev	olain how th	ev further	the organizati	on's exemp	nt nurnose in l	Part XIV.	
4	During the year, did the organization solicit or r							Q1171171	
5	to be sold to raise funds rather than to be main					or sirinar ac	55015	Yes	☐ No
Day	t IV Escrow and Custodial Arrange					s* to Form 9	990 Part IV II		
rai	reported an amount on Form 990, Part 2		inplete il org	anization	IIISWEIEG 16	3 (0 1 01111)	550, r art rv, n	110 0, 01	
10	Is the organization an agent, trustee, custodiar		modian, for	contributio	ns or other as	sets not in	cluded		
ıa		or other inter	mediary for	contributio	iis of other as	13013 1101 1111	Sidded	Yes	☐ No
L	on Form 990, Part X? L Yes L No b If "Yes," explain the arrangement in Part XIV and complete the following table:								
D	if res, explain the arrangement in Fart XIV ar	ia complete tri	e lollowing i	aole.				Amount	
	Doggana halana						1c	Amount	
	Beginning balance Additions during the year						1d		
	Distributions during the year						1e		·
_							1f		
f	Ending balance		lino 212					Yes	No
	Did the organization include an amount on For	iii 990, Pait A,	mie Zi '					103	
b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.									
1 401		(a) Current yea		rior year	(c) Two yea) Three years b	ack (e) Four v	ears back
1a	Beginning of year balance	(a) Content yea	10/1	noi year	10/ 1110 /02	10 00011 10	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
10 h	Contributions					· · · · · · · · · · · · · · · · · · ·	al n manne av	· · · · · · · · · · · · · · · · · · ·	. ' 'IN-' 'III-'
0	Net investment earnings, gains, and losses				-				***************************************
	Grants or scholarships				- 		''''''		
	Other expenditures for facilities				 				
e	·								
	and programs Administrative expenses			·	 				······
	End of year balance							····	
9	· —	and balance h	ald ac.		<u> </u>				
2	2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶%								
a _	Permanent endowment	%							
0									
	c Term endowment %								
Sa	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization hv. Yes No								
	by:							3a(i)	100 110
	(ii) unrelated organizations (ii) related organizations							3a(ii)	
		inted on requir	od on Cobo	dula D2				3b	
_	If "Yes" to 3a(ii), are the related organizations I							00 1	
4 Do	Describe in Part XIV the intended uses of the cart XII Investments - Land, Buildings				O Part Y Inc	10			
FB	<u> </u>	(a) Cost			o, Part A, line		umulated	(d) Book	value
	Description of investment	basis (inv		, , , , , ,	s (other)		eciation	(u) Book	value
1a	Land					ļ			
b	Buildings							_	
C	Leasehold improvements								
d	Equipment								

Schedule D (Form 990) 2009

0.

e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)

t VII Investments - Other Securities. See	Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
ncial derivatives			
ely-held equity interests			
			
	·····		
	···-	· · · · · · · · · · · · · · · · · · ·	
		· · · · · · · · · · · · · · · · · · ·	
(Col (b) must equal Form 990, Part X, col (B) line 12) ▶			
t VIII Investments - Program Related. Se	e Form 990, Part X, line 13.	······································	
	(b) Book value	(c) Method of value	
(a) Description of investment type	(b) Book value	Cost or end-of-year m	arket value

			 · · · · · · · · · · · · · · · ·
(Col (b) must equal Form 990, Part X, col (B) line 13) ▶		······································	······································
T IX Other Assets. See Form 990, Part X, line	15.		
	Description		(b) Book value
			
			
			>
(Column (b) must occup Form 990 Part Y col (B) line	15)		
t X Other Liabilities. See Form 990, Part X,	line 25	Amount	
t X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25	Amount	
rt X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25	Amount	
rt X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25	Amount	
rt X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25	Amount	
t X Other Liabilities. See Form 990, Part X, (a) Description of liability	line 25	Amount	
	line 25	Amount	

Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 932053 02-01-10

Schedule D (Form 990) 2009

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D (Form 990) 2009

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization Public Interest Projects Action Fund,

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization Public In	Interest Pr	Projects Action	lon Fund,				Employer identification number 80-0444461
Part 1 General Information on Grants and Assistance	and Assistance						
1 Does the organization maintain records to substantiate the amount of the	to substantiate th		s or assistance, the	grantees' eligibility	for the grants or ass	grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	stance?	,					X Yes No
Ω	ocedures for mon	itoring the use of grant	t funds in the United	d States.			
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule i-1 (Form 990) if additional space is needed	Governments an \$5.000, Check thi	od Organizations in the stockers box if no one recipler	ne United States. Contraction of the contraction of	complete if the organ \$5,000. Use Pa	inization answered "\ rt IV and Schedule I-1	'es" to Form 990, Part I (Form 990) if addition	IV, line 21, for any lal space is needed
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
National Economic & Social Rights Initiative - 90 John Street - New York NY 10038	73-1714118	501(c)3	145 000,	0			Campaign for a New Domestic Human Rights Agenda
Tides Center 55 Exchange Place New York, NY 10005	94-3213100	501(c)3	39,600.	.0			RWG Campaign
	_						
	and government c	rganizations					2.6
S Enter total number of other organizations HA For Privacy Act and Paperwork Reduction Act Notice see the Instru	etion Act Notice		ctions for Form 990.				Schedule I (Form 990) 2009

Public Interest Projects Action Fund,

Schedule I (Form 990) 2009

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

Page 2

80-044461

Schedule I (Form 990) 2009 (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance 23 (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance 932102 02-02-10

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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on

Department of the Treasury Internal Revenue Service

Form 990 or to provide any additional information. Attach to Form 990.

OMB No 1545-0047 Open to Public Inspection

Name of the organization Public Interest Projects Action Fund, Inc.	Employer identification number $80-0444461$
Form 990, Part I, Line 1, Description of Organization Mis	ssion:
to improve the quality of life for all persons.	. <u> </u>
Form 990, Part VI, Section B, line 11: A copy of the 990	is e-mailed to
the Board for review prior to filing.	
Form 990, Part VI, Section B, Line 12c: The conflict of	interest policy is
included in the Board policies and is reviewed and update	ed as necessary.
Form 990, Part VI, Section C, Line 19: Governing document	ts, the conflict
of interest policy and financial statements are available	e to the public
upon request.	
	<u> </u>

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. . .

Form	8868 (Rev 4-2009)				Page 2		
— ● If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and	check this box	(▼ X		
	Only complete Part II if you have already been granted an automatic 3-month extension on a p			168.			
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)						
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)							
Туре	Name of Exempt Organization	Emplo	yer identificati	on number			
print	Fublic interest Plojects Action rund,			044446			
File by	Inc.	[-044446	1		
extend	Number, street, and room or suite no. If a P.O box, see instructions.		For IRS	S use only			
ming u	to for 45 West 36th Street, 6th Floor	ļ					
return instruc				<u> </u>	, , , , ,		
	k type of return to be filed (File a separate application for each return)	_		,	-		
X		m 1041-A		m 5227	Form 8870		
	Form 990-BL Form 990-PF Form 990-T (trust other than above) Form	m 4720 L	For	m 6069			
STO	P! Do not complete Part II if you were not already granted an automatic 3-month extension	on a previou	sly filed	l Form 8868.			
	The Organization						
• Th	ne books are in the care of > 45 West 36th Street, 6th Floor -	- New Yo	rk,	NY 1001	8		
	elephone No ► 212-764-1508 FAX No. ►						
	the organization does not have an office or place of business in the United States, check this b	ox			▶ □		
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		s is for	the whole grou	p, check this		
box							
4	4 I request an additional 3-month extension of time until November 15, 2010.						
5	WWW. O.C. 2000						
6							
7	State in detail why you need the extension						
	ADDITIONAL TIME IS NEEDED TO FILE THE ORGANIZATION'S 990 DUE TO THE						
	FINANCIAL STATEMENT AUDIT NOT YET BEING COMPLTI		тг				
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, les	s any					
	nonrefundable credits. See instructions.		8a	\$			
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and e						
	tax payments made. Include any prior year overpayment allowed as a credit and any amount	paid					
	previously with Form 8868		8b	\$			
C	Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if require	· · · · · · · · · · · · · · · · · · ·		•	N/A		
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) Se	e instructions	8c	\$	N/A		
Hada	Signature and Verification	manta and to th	a haat a	t my knawladaa a	and bolief		
it is tr	r penalties of perjury, I declare that I have examined this form, including accompanying schedules and state ue, correct, and complete, and that א am authorized to prepare this form	andiks, dilu to tu	∞ กคลเด	my knowledge a	inu pellet,		
Signa	Should the a thouse of a CDA		Date	▶ 8.10.	10		
<u>g</u> .10					68 (Rev 4-2009)		